



Republic of the Philippines  
PROVINCE OF ISABELA

**PURCHASE ORDER**

Supplier : Gcmed Pharmaceutical Distributor

P.O. No. : 24-03-00044

Address : Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N

Date : March 1, 2024

Gentlemen:

Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery : PGSO

Delivery Term :

Charge

Date of Delivery : Seven (7) days after receipt of P.O.

Payment Term:

Check

Item No.	Unit	Quantity	Description		Amount
1	ampule	600	Serum, Tetanus Antitoxin (ATS) 3000 IU/0.95ml	512.30	307,380.00
2	ampule	100	Oxytocin 10 IU/ml, 1mL Solution for Injection	89.75	8,975.00
3	vial	100	Amikacin 50mg/ml, 2ml solution for injection	72.65	7,265.00
4	ampule	250	Aminophylline (Theophylline Ethylenediamine) 25mg/ml, 10ml	28.07	7,017.50
5	tablet	200	Domperidone 10mg tablet	14.85	2,970.00
6	tablet	200	Captopril 25mg tablet	2.85	570.00
7	inhaler	10	Fluticasone + Salmeterol 250mcg + 25mcg, 120 actuations M	391.85	3,918.50
8	bottle	36	Multivitamins per 5ml, 60ml syrup bottle	48.84	1,758.24
9	tablet	1000	Carvedilol 6.25mg tablet	4.85	4,850.00
10	vial	2400	Cefuroxime 750mcg powder for injection vial	89.85	215,640.00
11	ampule	450	Tranexamic Acid 100mg/ml, 5ml solution for injection ampule	129.85	58,432.50
12	ampule	800	Ranitidine 25mg/ml, 2ml solution for injection	23.64	18,912.00
13	ampule	600	Paracetamol 150mg/ml, 2ml ampule	20.96	12,576.00



**Total Amount**

**Six Hundred Fifty Thousand Two Hundred Sixty Four Pesos & 74/100**

**Php 650,264.74**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed.

Very truly yours,

Conforme:

Gcmed Pharmaceutical Distributor  
(Signature over printed Name)

3-8-24  
(Date)

**RODOLFO T. ALBANO III**  
Governor

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished).  
Approved per Sanggunian Resolution No.: \_\_\_\_\_

Certified Correct: \_\_\_\_\_

Date: \_\_\_\_\_